

Official Form 1 (4/07)

<b>United States Bankruptcy Court</b> <b>Northern District of Illinois</b>						<b>Voluntary Petition</b>																					
Name of Debtor (if individual, enter Last, First, Middle): <b>Smith, Eddie Joe</b>				Name of Joint Debtor (Spouse) (Last, First, Middle):																							
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>AKA Eddie J. O. Smith, Jr.; AKA Eddie Joe Otha Smith, Jr.; AKA Edward Smith</b>				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																							
Last four digits of Soc. Sec./Complete EIN or other Tax ID No. (if more than one, state all): <b>xxx-xx-4083</b>				Last four digits of Soc. Sec./Complete EIN or other Tax ID No. (if more than one, state all):																							
Street Address of Debtor (No. and Street, City, and State): <b>716 Hayes Ave Oak Park, IL</b>				Street Address of Joint Debtor (No. and Street, City, and State):																							
ZIP Code <b>60302</b>				ZIP Code																							
County of Residence or of the Principal Place of Business: <b>Cook</b>				County of Residence or of the Principal Place of Business:																							
Mailing Address of Debtor (if different from street address):				Mailing Address of Joint Debtor (if different from street address):																							
ZIP Code				ZIP Code																							
Location of Principal Assets of Business Debtor (if different from street address above):																											
<b>Type of Debtor</b> (Form of Organization) (Check one box)  <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check one box)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> <b>Tax-Exempt Entity</b> (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)  <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> <b>Nature of Debts</b> (Check one box)  <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.																							
<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				<b>Chapter 11 Debtors</b> Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																							
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						THIS SPACE IS FOR COURT USE ONLY																					
Estimated Number of Creditors <table style="width: 100%; text-align: center;"> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1000-5,000</td> <td>5001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>100,001-100,000</td> <td>OVER 100,000</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>								1-49	50-99	100-199	200-999	1000-5,000	5001-10,000	10,001-25,000	25,001-50,000	100,001-100,000	OVER 100,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Estimated Assets <table style="width: 100%;"> <tr> <td><input type="checkbox"/> \$0 to \$10,000</td> <td><input type="checkbox"/> \$10,001 to \$100,000</td> <td><input checked="" type="checkbox"/> \$100,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$100 million</td> <td><input type="checkbox"/> More than \$100 million</td> </tr> </table>						<input type="checkbox"/> \$0 to \$10,000	<input type="checkbox"/> \$10,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$100 million	<input type="checkbox"/> More than \$100 million																	
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<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$100 million	<input type="checkbox"/> More than \$100 million																							

**Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

**Smith, Eddie Joe****All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **Northern District of IL**

Case Number:

**05-08755**

Date Filed:

**3/11/05**

Location

Where Filed: **See Attachment**

Case Number:

Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor:

Case Number:

Date Filed:

**- None -**

District:

Relationship:

Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

**X /s/ Peggy Ann Doheny****April 23, 2007**

Signature of Attorney for Debtor(s)

(Date)

**Peggy Ann Doheny 6193726****Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Statement by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes)

- ☐
- Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)\_\_\_\_\_  
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

# Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):  
**Smith, Eddie Joe**

## Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.  
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ Eddie Joe Smith  
Signature of Debtor **Eddie Joe Smith**

**X** \_\_\_\_\_  
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

**April 23, 2007**  
Date

### Signature of Attorney

**X** /s/ Peggy Ann Doheny  
Signature of Attorney for Debtor(s)

**Peggy Ann Doheny 6193726**  
Printed Name of Attorney for Debtor(s)

**Law Offices of Peggy Ann Doheny**  
Firm Name  
**711 South Boulevard**  
**Suite 6**  
**Oak Park, IL 60302**

Address

**Email: PADhoney@ameritech.net**  
**708-848-6500 Fax: 708-848-6599**

Telephone Number

**April 23, 2007**  
Date

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** \_\_\_\_\_  
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X** \_\_\_\_\_  
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**X** \_\_\_\_\_  
Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.*

In re Eddie Joe Smith, Case No. \_\_\_\_\_  
Debtor

**FORM 1. VOLUNTARY PETITION**  
**Prior Bankruptcy Cases Filed Attachment**

<u>Location Where Filed</u>	<u>Case Number</u>	<u>Date Filed</u>
Northern District of IL	05-08755	03/11/05
Northern District of IL	04-21933	06/08/04
Northern District of IL	03-36255	09/03/03

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court  
Northern District of Illinois

In re Eddie Joe Smith

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]* \_\_\_\_\_

**If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.**



In re **Eddie Joe Smith**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D  W I F E  J O I N T  C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D, N A T U R E O F L I E N, A N D D E S C R I P T I O N A N D V A L U E O F P R O P E R T Y S U B J E C T T O L I E N	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M W I T H O U T D E D U C T I N G V A L U E O F C O L L A T E R A L	U N S E C U R E D P O R T I O N, I F A N Y
Account No. <b>xx CH x8228</b>			<b>May 30 2006</b>					
<b>Argent Mortgage Company LLC C/o Pierce &amp; Associates 1 North Dearborn, 13th Fl Chicago, IL 60602</b>	<b>X</b>	<b>J</b>	<b>First Mortgage  716 Hayes Ave Oak Park, IL</b>				<b>428,000.00</b>	<b>0.00</b>
			Value \$ <b>450,000.00</b>					
Account No. <b>xxxxxxxxxxxx9001</b>			<b>Car Loan</b>					
<b>Wells Fargo PO Box 29704 Phoenix, AZ 85038-9704</b>		<b>-</b>	<b>2006 Hundia Accord</b>				<b>20,485.27</b>	<b>2,485.27</b>
			Value \$ <b>18,000.00</b>					
Account No.								
			Value \$					
Account No.								
			Value \$					
Subtotal (Total of this page)							<b>448,485.27</b>	<b>2,485.27</b>
Total (Report on Summary of Schedules)							<b>448,485.27</b>	<b>2,485.27</b>

0 continuation sheets attached

In re **Eddie Joe Smith**

Case No. \_\_\_\_\_

Debtor

## SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trust or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



Official Form 6F (10/06)

In re **Eddie Joe Smith**,  
Debtor

Case No. \_\_\_\_\_

## SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>1330xxxx</b>  <b>Certegy Payment Recovery</b> <b>11601 Roosevelt Blvd N#</b> <b>Saint Petersburg, FL 33716</b>	H	<b>November 2002</b> <b>Revolving Collection - NSF on Check</b>				<b>103.00</b>
Account No. <b>1367xxxx</b>  <b>Certegy Payment Recovery</b> <b>11601 Roosevelt Blvd N#</b> <b>Saint Petersburg, FL 33716</b>	H	<b>Decmber 2002</b> <b>Revolving Collection - NSF on Check</b>				<b>200.00</b>
Account No. <b>9102xxxx</b>  <b>Collection (660YC00000)</b>	H	<b>February 2007</b> <b>Land Scaping Bill</b>				<b>207.00</b>
Account No. <b>6xxxx</b>  <b>Collection(155YC05441ChristopherLa</b> <b>n</b>	H	<b>February 2007</b> <b>Land Scaping Bill</b>				<b>150.00</b>
Subtotal (Total of this page)						<b>660.00</b>

3 continuation sheets attached

In re **Eddie Joe Smith**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>3009xxxx</b>  <b>Ford Motor Credit</b> <b>PO Box 542000</b> <b>Omaha, NE 68154</b>	H	<b>January 2002</b> <b>Repossessed Car 1999 Saturn</b>				<b>6,158.00</b>
Account No. <b>726xxxx</b>  <b>Friedman &amp; Wexler/14 Menard Inc</b> <b>500 W Madison St</b> <b>Chicago, IL 60661</b>	H	<b>June 2003</b> <b>Credit Line</b>				<b>707.00</b>
Account No. <b>xx D 9301</b>  <b>Lydia Bell</b> <b>2 S Mayfield St, # 202</b> <b>Chicago, IL 60644</b>	H	<b>March 16 2007</b> <b>Property Distribution</b>				<b>14,937.50</b>
Account No. <b>2635xxxx</b>  <b>Mazda American Credit</b> <b>9009 Caruthers Parkway</b> <b>Franklin, TN 37067</b>	H	<b>January 2001</b> <b>Repossessed Car - 2001 Hundai Sonata</b>				<b>15,739.00</b>
Account No. <b>xx5300xxxx</b>  <b>Merchants CR/Hindale Hospital</b> <b>223 W Jackson St</b> <b>Chicago, IL 60606</b>	H	<b>October 2005</b> <b>Medical Bill</b>				<b>1,700.00</b>
Sheet no. <u>1</u> of <u>3</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>39,241.50</b>

In re **Eddie Joe Smith**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>27xxxx</b>  <b>Montgomery Wards/MBGA</b> <b>PO Box 981400</b> <b>El Paso, TX 79998</b>	H	<b>November 1997</b> <b>Revolving Collection - Line of Credit</b>				<b>780.00</b>
Account No. <b>x5149xxxx</b>  <b>NCO Financial/12 Progressive Ins Co</b> <b>PO Box 41466</b> <b>Philadelphia, PA 19101</b>	H	<b>September 2005</b> <b>Auto Insurance Bill</b>				<b>171.00</b>
Account No. <b>xxx5725xxxx</b>  <b>Nicor Gas</b> <b>1844 Ferry Rd</b> <b>Naperville, IL 60563</b>	H	<b>August 2003</b> <b>Gas Bill</b>				<b>1,650.00</b>
Account No. <b>69xxxx</b>  <b>Nicor Gas</b> <b>1844 Ferry Rd</b> <b>Naperville, IL 60563</b>	H	<b>March 2003</b> <b>Gas Bill</b>				<b>2,265.00</b>
Account No. <b>396xxxx</b>  <b>Pentagroup Financial</b> <b>5959 Corporate Dr, Suite 14</b> <b>Houston, TX 77036</b>	H	<b>December 2006</b> <b>Closed Checking account at US Bank</b>				<b>627.00</b>
Sheet no. <u>2</u> of <u>3</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>5,493.00</b>
Subtotal (Total of this page)						<b>5,493.00</b>

In re **Eddie Joe Smith**, Debtor Case No. \_\_\_\_\_

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>x2921xxxx</b>  <b>VW Credit</b> <b>2333 Waukegan Rd</b> <b>Deerfield, IL 60015</b>		H	<b>March 2003</b> <b>Reposessed Car- 2001 Volkswagan Beatle</b>				<b>26,058.00</b>
Account No. <b>xxx-xx-4083</b>  <b>Women's Legal Services</b> <b>105 West Madison St, Suite 1300</b> <b>Chicago, IL 60602</b>		H	<b>March 16 2007</b> <b>Legal Fees</b>				<b>2,000.00</b>
Account No.							
Account No.							
Account No.							
Sheet no. <b>3</b> of <b>3</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							<b>28,058.00</b>
Subtotal (Total of this page)							
Total (Report on Summary of Schedules)							<b>73,452.50</b>

In re **Eddie Joe Smith**

Case No. \_\_\_\_\_

Debtor(s) \_\_\_\_\_

**SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status:  <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): <b>Son</b> <b>Daughter</b> <b>Son</b> <b>Daughter</b> <b>Son</b> <b>Son</b> <b>Son</b>	AGE(S): <b>1</b> <b>13</b> <b>3</b> <b>3</b> <b>6</b> <b>6</b> <b>9</b>
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	<b>Inspector</b>	
Name of Employer	<b>Village of Oak Lawn</b>	
How long employed	<b>3 Months</b>	
Address of Employer	<b>123 Madison St Oak Park, IL 60302</b>	

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)

DEBTOR	SPOUSE
\$ <b>4,499.99</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>

2. Estimate monthly overtime

3. SUBTOTAL

\$ <b>4,499.99</b>	\$ <b>N/A</b>
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4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

\$ <b>462.61</b>	\$ <b>N/A</b>
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b. Insurance

\$ <b>231.83</b>	\$ <b>N/A</b>
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c. Union dues

\$ <b>0.00</b>	\$ <b>N/A</b>
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d. Other (Specify) **See Detailed Income Attachment**

\$ <b>330.66</b>	\$ <b>N/A</b>
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5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ <b>1,025.10</b>	\$ <b>N/A</b>
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6. TOTAL NET MONTHLY TAKE HOME PAY

\$ <b>3,474.89</b>	\$ <b>N/A</b>
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7. Regular income from operation of business or profession or farm (Attach detailed statement)

\$ <b>0.00</b>	\$ <b>N/A</b>
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8. Income from real property

\$ <b>0.00</b>	\$ <b>N/A</b>
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9. Interest and dividends

\$ <b>0.00</b>	\$ <b>N/A</b>
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10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

\$ <b>0.00</b>	\$ <b>N/A</b>
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11. Social security or government assistance

(Specify): \_\_\_\_\_

\$ <b>0.00</b>	\$ <b>N/A</b>
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\_\_\_\_\_

\$ <b>0.00</b>	\$ <b>N/A</b>
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12. Pension or retirement income

\$ <b>0.00</b>	\$ <b>N/A</b>
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13. Other monthly income

(Specify): \_\_\_\_\_

\$ <b>0.00</b>	\$ <b>N/A</b>
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\_\_\_\_\_

\$ <b>0.00</b>	\$ <b>N/A</b>
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14. SUBTOTAL OF LINES 7 THROUGH 13

\$ <b>0.00</b>	\$ <b>N/A</b>
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15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$ <b>3,474.89</b>	\$ <b>N/A</b>
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16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)

\$ <b>3,474.89</b>	
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(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

In re Eddie Joe Smith  
Debtor(s)

Case No. \_\_\_\_\_

**SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**  
**Detailed Income Attachment**

**Other Payroll Deductions:**

<u>Dental S125</u>	\$ <u>104.00</u>	\$ <u>N/A</u>
<u>Supplemental Life Ins</u>	\$ <u>6.83</u>	\$ <u>N/A</u>
<u>IMRF Life Ins Non Tax</u>	\$ <u>17.33</u>	\$ <u>N/A</u>
<u>IL Municipal Retirement Fund</u>	\$ <u>202.50</u>	\$ <u>N/A</u>
<u>Total Other Payroll Deductions</u>	\$ <u>330.66</u>	\$ <u>N/A</u>

Argent Mortgage Company LLC  
C/o Pierce & Associates  
1 North Dearborn, 13th Fl  
Chicago, IL 60602

Certegy Payment Recovery  
11601 Roosevelt Blvd N#  
Saint Petersburg, FL 33716

Certegy Payment Recovery  
11601 Roosevelt Blvd N#  
Saint Petersburg, FL 33716

Collection (660YC00000)

Collection(155YC05441ChristopherLan

Ford Motor Credit  
PO Box 542000  
Omaha, NE 68154

Friedman & Wexler/14 Menard Inc  
500 W Madison St  
Chicago, IL 60661

Leslie L Johnson  
716 Hayes Ave  
Oak Park, IL 60302

Lydia Bell  
2 S Mayfield St, # 202  
Chicago, IL 60644

Mazda American Credit  
9009 Caruthers Parkway  
Franklin, TN 37067

Merchants CR/Hindale Hospital  
223 W Jackson St  
Chicago, IL 60606

Montgomery Wards/MBGA  
PO Box 981400  
El Paso, TX 79998

NCO Financial/12 Progressive Ins Co  
PO Box 41466  
Philadelphia, PA 19101

Nicor Gas  
1844 Ferry Rd  
Naperville, IL 60563

Nicor Gas  
1844 Ferry Rd  
Naperville, IL 60563

Pentagroup Financial  
5959 Corporate Dr, Suite 14  
Houston, TX 77036

VW Credit  
2333 Waukegan Rd  
Deerfield, IL 60015

Wells Fargo  
PO Box 29704  
Phoenix, AZ 85038-9704

Women's Legal Services  
105 West Madison St, Suite 1300  
Chicago, IL 60602